## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

0465-1054 P

| CLAIMS AS FILED - PART I   |  |   |                 |              |                              |                  |    | MALL EN             |                        |         | OTHER               |                        |
|--|--|---|-----------------|--------------|------------------------------|------------------|----|---------------------|------------------------|---------|---------------------|------------------------|
|  |  |   | (Column 1)      |              | (Column 2)                   |                  | ]  | YPE                 |                        | or<br>• | SMALL E             |                        |
| TOTAL CLAIMS   |  |   | 27              |              |                              |                  |    | RATE                | FEE                    | -       | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED    |              | NUMBER EXTRA                 |                  |    | BASIC FEE           | 375.00                 | OR      | ASIC FEE            | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 27 minus 20=    |              | · 4                          |                  |    | X\$ 9=              |                        | OR      | X\$18=              | 126                    |
| INDEPENDENT CLAIMS   |  |   | 3 minus 3 =     |              | '                            |                  |    | X42=                |                        | OR      | X84=                |                        |
| MUI  | TIPLE DEPEND                                   | DENT CLAIM PI                             | RESENT          |              |                              |                  |    | +140=               |                        | OR      | +280=               |                        |
| * If the difference in column 1 is less than zero, enter   |  |   |                 |              |                              | olumn 2          |    | TOTAL               |                        | OR      | TOTAL               | 876                    |
| CLAIMS AS AMENDED - PART II  |  |   |                 |              |                              |                  |    |                     |                        |         | OTHER               | THAN                   |
|  | 211165   | (Column 1)                                | CAICIADED       | (Colu        |                              |                  | _  | SMALL E             | NTITY                  | OR      | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |    | RÄTE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | ·27                                       | Minus           | **2          | 7                            | =                |    | X\$ 9=              |                        | OR      | X\$18=              |                        |
|  | Independent                                    | • 3                                       | Minus           | ***          | 3                            | -                |    | X42=                | ·                      | ØR      | X84=                |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |              |                              |                  | 1  | +140= /             |                        | OR      | +280=               |                        |
|  |  |   |                 |              |                              |                  |    | TOTAL<br>ADDIT: FEE |                        | OR      | TOTAL<br>ADDIT, FEE |                        |
|  |  | (Calumn 4)                                |                 | (Col:        | ımn 2)                       | (Column 3        | 1  | ADON. I CE          |                        |         |                     |                        |
|  |  | (Column 1)<br>CLAIMS                      |                 |              | HEST                         | Toolaring        | 7  |                     | ADDI-                  | 1       | Γ                   | ADDI-                  |
| AMENDMENT B  |  | REMAINING<br>AFTER                        |                 |              | MBER                         | PRESENT          |    | RATE                | TIONAL                 |         | RATE                | TIONAL                 |
|  |  | AMENDMENT                                 |                 |              | FOR                          |                  | 4  |                     | FEE                    |         |                     | FEE                    |
|  | Total  | *   | Minus           | <b>ATR</b>   |                              | =                | 1  | X\$ 9=              |                        | OR      | X\$18=              |                        |
|  | Independent                                    | •   | Minus           | ***          |                              | -                |    | X42=                |                        | OR      | X84=                |                        |
| 口  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |              |                              |                  | 4  | +140=               |                        | OR      | +280=               |                        |
|  |  |   |                 |              |                              |                  |    | TOTAL               |                        | OR      | TOTAL               |                        |
|  |  |   |                 |              |                              |                  |    |                     |                        |         |                     |                        |
| _  |  | (Column 1)                                |                 |              | umn 2)                       | (Column :        | 4  |                     | 4551                   | 3       |                     | ADDI-                  |
| ပ  |  | REMAINING                                 |                 | NU           | MBER                         | PRESENT          |    | RATE                | ADDI-<br>TIONAL        |         | RATE                | TIONAL                 |
|  |  | AFTER AMENDMENT                           | -               |              | VIOUSLY<br>ID FOR            | EXTRA            |    | FAIL                | FEE                    |         | 1                   | FEE                    |
| AMENDMENT C  | Total  | *   | Minus           | 44           |                              | =                |    | X\$ 9=              |                        | OR      | X\$18=              |                        |
| MA   | Independent                                    | •   | Minus           | ***          |                              | =                |    | X42=                |                        | OR      | X84=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |              |                              |                  |    |                     |                        | 1       |                     |                        |
| ١.   |  |   | the estavis or  | dumo 2 w     | rita "N° in (                | volumo 3         |    | +140=               | <u> </u>               | OR      |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                 |              |                              |                  |    |                     |                        |         | ADDIT. FE           |                        |
| 1  | and the Oldeback block                         | umber Previously<br>mber Previously (     | , Paid For IN T | HIS SPAC     | F is less t                  | nan 3. enter 7   | 3. | lound in the a      | ppropriate b           | ox in c | column 1.           |                        |
| 1  |  |   |                 |              |                              |                  |    |                     |                        |         |                     |                        |